GENEVA COUNTY

APPLICATION FOR EMPLOYMENT

Mailing Address: Attn: Personnel Depai Geneva County Comm P O Box 430 Geneva, AL 36340				re consideration without se of race, religion, color, sex, disability.
POSITION APPLIED FOR	Solid Waste Collector		DATE OF APPLICATION	<u> </u>
NAME:			SOCIAL SECURITY NO:	
Last	First	Middle		
ADDRESS				
No. Street		City	State	Zip
or Immigration status?	YES NO			this country because of VISA
Driver License #:	**************************************	reg	gularCDL: AB	None
Telephone number to co	ontact you:		- 5	
EDUCATION	High School	Coll	ege	Graduate/Professional training
Number of Years Completed				
Diploma/degree & year (including GED if applicable)				
Describe special trainin	g, special skills, licenses	s and extra curric	ular activities that may qua	lify you for the position you

Describe special training, special skills, licenses and extra curricular activities that may qualify you for the position you are applying for.

Special Consideration

You may inform us if you have a disability requiring accommodation. State any additional information you feel would be helpful to us in considering your application.

Start with your present or last job.
Include military service or volunteer work.
Exclude organizations which indicate race, religion, sex, or national origin.

Employment Experience

Employer	Dates employed	Job Title:	
l .	From:		8
	To:		H
Employer's Address:			
Describe work performed:			-
5.			
Supervisor's - Name	Address:	Phone number:	
oupervisor s manie	Addiess.	Phone number:	
Reason for leaving:			
neason for leaving.			
Employer	Dates employed	Job Title:	_
	From:	Job fide.	
	To:		
Employer's Address:	10.		
Describe work performed:			
Describe work performed.			
et			
Supervisor's - Name	Address:	Phone number;	
Supervisor's - Name	Address.	Phone number:	
Reason for leaving:			4
Neason for leaving.			
Employer	Dates employed		4
cinpioyei	From:		j.
	To:	Into The Land	
Employer's Address:	10.	Job Title:	
Describe work performed:			
Describe work performed.			j
170			
			1
Company of Name	Adda		
Supervisor's- Name	Address	Phone number:	
Decree for leaving			
Reason for leaving:			
			- 9

0 2 2				
Employer	Dates employed	Job Title:		
	From: To:			
Employer's Address:	10:			
Describe work performed:				
,				
Supervisor's -Name	Address	Phone number:		
Supervisor S Traine				
Reason for leaving:				

Personal References (Not former	employees or relatives)	who can attest to your character & job experience.		
Newson		Namos		
Name:		Name:		
Phone#	10	Phone#		
Address		Address		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Name:				
Phone#				
		*		
Address				

Geneva County is an Equal Opportunity Employer. The county does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

AUTHORIZATION AND RELEASE (Please Read Carefully)

Geneva County is a drug free workplace. We do pre-employment and random drug testing of safety-sensitive position applicants and employees.

I understand that all appointments offered me will be contingent upon the results of a physical examination and preemployment drug screen for a safety sensitive position. I am aware that willfully withholding information or making false statements on the application will be a basis for denial of a position prior to employment, or will be grounds for dismissal after appointment. I agree that this application and all other papers shall be confidential records for the Personnel Board subject to inspection by the appointing authority.

I understand that any information I give may be investigated as allowed by law. I give the County the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the County and their representatives from seeking this information, and all other persons, corporations or organizations for furnishing such information.

I understand that just as I am free to resign at any time, the County reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the County has the authority to make any assurances to the contrary.

I certify that to the best of my knowledge and belief, all of my statements on employment application and related employment papers are true, correct, and complete, and made in good faith.

A copy of this authorization shall be effective and valid as the or	·	
Signature (sign in dark ink)	Date signed	

SUBMISSION PROCEDURES:

- 1. You may print this form and SIGN to be mailed to the Geneva County Personnel Department, P O Box 430, Geneva, AL 36340.
- 2. You may print, SIGN and fax application to 334-684-5654 in lieu of mailing.
- 3. You may use Email to submit a copy of the form; however, a signed paper copy must also be submitted.

 After filling out the above form, click the "SUBMIT FORM" button. The form will be attached to an email which you can then send to the Geneva County Personnel Department. Email address: hodom@genevacounty.org

Submit Form

SUPPLEMENT TO SOLID WASTE APPLICATION

1.	Fai	maiı	ent	oper	ation
-	-90	416111	CITC	OPCI	acion

Mark each item of equipment you can operate

⊔Backhoe	
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□Front-end Loader

☐Front-end Loader

☐Tractor w/attachments

□Tractor w/ trailer

□Compactor garbage truck w/ lift

☐ Other_____

☐ Other_____

☐ Other_____

2. Circle yes/no to show you can/cannot perform the following equipment maintenance functions for the equipment you marked above.

Grease Fittings	Yes	<u>No</u>
Check Fuel/Oil/Fluids	Yes	No
Change Oil/Filters/Fluids	Yes	No
Change Transmission Fluid	Yes	No
Check Tires & Lights	Yes	<u>No</u>
Check/adjust tire pressure	Yes	No
Cleaning garbage truck & lift	Yes	No
Safety Inspection	Yes	No

- 3. Tell us about any other maintenance of equipment you can perform.
- 4. Are you physically able to lift item weighing 50 to 100 lbs on an occasional basis?
- 5. Are you physically able to work in extreme weather conditions during summer and winter?